Late Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER Gallagher for Assembly 2024		Date of This Filing05/04/2023	Date Stamp	CALIFORNIA 497		
AREA CODE/PHONE NUMBER (916)686-1815	I.D. NUMBER (if applicable) 1456526	Report No		For Official Use Only		
STREET ADDRESS		Amendment to Report No.	Page 1 of 2			
CITY Sacramento	STATE ZIP CODE CA 95814	(explain below) No. of Pages 2				

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
04/24/2023	California Dental Association PAC (CDA PAC) Sacramento, CA 95814 ID# 742855	☐ IND ■ COM □ OTH □ PTY □ SCC		\$5,500.00
04/27/2023	California New Car Dealers Association PAC (CNCDA-PAC) Sacramento, CA 95814 ID# 741623	☐ IND ■ COM ☐ OTH ☐ PTY ☐ SCC		\$5,500.00
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		

*Contributor Codes	
IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC) OTH - Other	SCC - Small Contributor Committee
OTT - Guici	

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

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Late Contri	bution(s) Made									
		MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION		AMOUNT OF CONTRIBUTION		DATE OF ELECTION (IF APPLICABLE)	

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC